WATER AND WASTE WATER SYSTEM MUNICIPALLY OWNED 600 Main Street • P.O. Box 206 • Tioga, Texas 76271 Phone 940-437-2351 • Fax 940-437-2432

Website: www.tiogatx.gov

Customer Information:

Name:	Driver's	License Number: _	
Phone Number:	Type:	HomeCel	llWorkOthe
Service Address:			, Tioga, Texas 76271
Mailing Address:	City:	State:	Zip:

The City of Tioga Water System is responsible for protecting the drinking water supply from contamination or pollution which could result from improper private water distribution system construction or configuration. The purpose of this service agreement is to notify each customer of the restrictions which are in place to provide this protection. The utility enforces these restrictions to ensure the public health and welfare. Each customer must sign this agreement before the City of Tioga will begin service.

SERVICE AGREEMENT. The following are the terms of the service agreement between the City of Tioga Water System and the customer:

- A. I agree to pay a deposit and a connect fee to begin service at the location shown above. (Current fees: \$100.00 deposit for residential service, \$150.00 deposit for commercial service, connect fee \$20.00)
- B. I agree that if I have ever had water service in the City of Tioga and have an outstanding balance from a previous account that I must pay the balance of that account, in addition to a deposit and connection fee, before service will begin.
- C. I understand that before water service can be connected the property must pass a certificate of occupancy inspection provided by the City and I am responsible for the cost of this inspection.
- D. I agree to pay the City of Tioga for all services furnished at the rate set by the current ordinance on or before the 10th of the next month following the billing. I understand that I have the options of paying in person at 600 Main Street, by mail at P.O. Box 206, Tioga, Texas 76271 or that I can sign up for E-Bill or E-Pay at www.tiogatx.gov.
- E. I agree that if I pay by check and the check is returned for insufficient funds, the City of Tioga can discontinue service until the check is picked up and all associated fees paid. (Current fees include \$25.00 returned check fee plus any fees charged to the City of Tioga by the bank)
- F. I understand that the City of Tioga charges a convenience fee for all debit and/or credit card transactions.
- G. I agree to pay a 10% penalty assessed on outstanding accounts if balance is not paid by the 10th of the next month after the billing.
- H. I agree that service will be disconnected on the 16th day of the next month following the billing if the account is not paid in full by the 15th.
- I. I agree that after service has been disconnected there will be a reconnect fee that must be paid in addition to the outstanding balance on my account before service is resumed. The amount of the reconnect fee is to be determined by the current fee ordinance. (The current reconnect fee is \$20.00 during office hours and \$40.00 after office hours)
- J. I agree that if my meter is found turned on after being turned off by the City for non-payment, there will be a \$50.00 meter reset fee that must be paid before service is resumed.
- K. I agree to allow my property to be inspected for possible cross-connections and other potential contamination hazards. These inspections shall be conducted by the Water System or its

designated agent prior to initiating new water service; when there is reason to believe that cross-connections or other potential contamination hazards exist; or after any major changes to the private water distribution facilities. The inspections shall be conducted during the Water System's normal business hours.

- L. I understand that the Water System will notify me in writing of any cross-connection or other potential contamination hazard which has been identified during the initial inspection or the periodic re-inspection. I agree to immediately remove or adequately isolate any potential cross-connections or other potential contamination hazards on my premises.
- M. I agree to, at my own expense, properly install, test, and maintain any backflow prevention device required by the Water System. Copies of all testing and maintenance records shall be provided to the Water System.
- N. The Water System will maintain a copy of this agreement as long as the Customer and/or the premises is connected to the Water System.

RESTRICTIONS. The following unacceptable practices are prohibited by State regulations.

- 1. No direct connection between the public drinking water supply and a potential source of contamination is permitted. Potential sources of contamination shall be isolated from the public water system by an air-gap or an appropriate backflow prevention device.
- 2. No cross-connection between the public drinking water supply and a potential source of contamination is permitted. These potential threats to the public drinking water supply shall be eliminated at the service connection by the installation of an air-gap or a reduced pressure-zone backflow prevention device.
- 3. No connection which allows water to be returned to the public drinking water supply is permitted.
- 4. No pipe or pipe fitting which contains more than 8.0% lead may be used for the installation or repair of plumbing at any connection which provides water for human use.
- 5. No solder or flux which contains more than 0.2% lead can be used for the installation or repair of plumbing at any connection which provides water for human use.

ENFORCEMENT. If the Customer fails to comply with the terms of the Service Agreement, the Water System shall, at its option, terminate service or properly install, test and maintain an appropriate backflow prevention device at the service connection. Any expenses associated with the enforcement of this agreement shall be billed to the customer.

Customer Signature:		Date:
THE CITY OF TIOGA OFFERS SENIOR OWATER USED EACH MONTH ON RESIDE MUST BE AT LEAST 65 YEARS OLD AND A	ENTIAL ACCOUNTS	SCOUNT ON THE FIRST 1,000* GALLONS OF (*Subject to the current water rate ordinance). YOU DENT OF THE PROPERTY TO QUALIFY.
ASK FOR YOUR SENIOR CITIZEN D	DISCOUNT APPLIC	CATION IF YOU QUALIFY.
Date Deposit Paid:	Amount Paid:	
Date Connect Fee Paid:	Amount Paid:	
Service Location #:	Route #:	Seq. #:
Account #:	_	
Notes:		